

TRAVEL AND ACTIVITY AUTHORIZATION

☐ Special one time permission for this activity only ☐ Blanket permission for all given activities
I, parent/guardian of Name of Parent/Guardian
give my permission Name of Child
for my child to
participate in the following activities:
Trips in the van/automobile (facility or parent - owned)
Explain planned activity - where and when
Explain planned activity - where and when
Field trips away from the facility
Explain planned activity - where and when
I understand that the facility will use the appropriate child restraint devises and abide by all District of Columbia safety rules when my child is transported in a vehicle. The facility will also notify me each time that my child participate in an activity that would involve transportation.
In addition, if the facility has planned activities outside the fenced area of the facility,
☐ I will allow my child to play outside the fenced area; or
☐ I will not allow my child to play outside the fenced area.
This authorization is valid from/ to/
Parent/Guardian Signature Date Signed

PLEASE KEEP A COPY IN THE CHILD'S FILE.